



## UNITED STATES PATENT AND TRADEMARK OFFICE

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UNITED STATES PATENT AND TRADEMARK OFFICE  
WASHINGTON, D.C. 20231  
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Bib Data Sheet

CONFIRMATION NO. 3974

<b>SERIAL NUMBER</b> 09/878,695	<b>FILING DATE</b> 06/11/2001 <b>RULE</b>	<b>CLASS</b> 514	<b>GROUP ART UNIT</b> 1614	<b>ATTORNEY DOCKET NO.</b> 12139Z
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**APPLICANTS**  
Gregor Reid, London, CANADA;  
Andrew W. Bruce, Toronto, CANADA;

**\*\* CONTINUING DATA \*\*\*\*\***  
THIS APPLICATION IS A CIP OF 09/459,292 12/10/1999 *aw*

**\*\* FOREIGN APPLICATIONS \*\*\*\*\***  
*None*

**IF REQUIRED, FOREIGN FILING LICENSE GRANTED.. SMALL ENTITY \*\***  
**\*\* 08/06/2001**

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance <i>aw</i>	STATE OR COUNTRY CANADA	SHEETS DRAWING 7	TOTAL CLAIMS 29	INDEPENDENT CLAIMS 5
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Verified and Acknowledged  
Examiner's Signature \_\_\_\_\_ Initials \_\_\_\_\_

**ADDRESS**  
SCULLY, SCOTT, MURPHY & PRESSER  
400 Garden City Plaza  
Garden City, NY 11530

**TITLE**  
Oral administration of lactobacillus for the treatment and prevention of urogenital infection

<b>FILING FEE RECEIVED</b> 581	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees
		<input type="checkbox"/> 1.16 Fees ( Filing )
		<input type="checkbox"/> 1.17 Fees ( Processing Ext. of time )
		<input type="checkbox"/> 1.18 Fees ( Issue )
		<input type="checkbox"/> Other _____
		<input type="checkbox"/> Credit